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SECRETARY OF STATE DIVISION OF CORPORATION

T. HAMPTON

MAY - 8 2008

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Mediterranean Village Rentals, LLC. (Name of Limited Liability Company)
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
John T. Loos (Name of Person)
Mediterranean Village Rentals, LLC (Firm/Company)
1815 Cordova Road, Suite 210
FOIT LAUGUS ACCITION TO COLOR CITY/State and Zip Code)
For further information concerning this matter, please call:
Chery Kunkovich at (954), 527-4500 K111 (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
S25.00 Filing Fee \$\ \text{S30.00 Filing Fee & Certificate of Status} \text{S55.00 Filing Fee & Certified Copy (additional copy is enclosed)} \text{Certified Copy (additional copy is enclosed)} \text{Certified Copy (additional copy is enclosed)}

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Ned terror (Name of the Limited Limite	CAN VILAGE ability Company as It now appears or orida Limited Liability Company)	Rentals, LLC	
The Articles of Organization for this Limited Liab Florida document number <u>L07000348</u>	ility Company were filed on 400	and assigned SECRE	
This amendment is submitted to amend the follow	ing:	TARY OF STATEONS OF CORPORATIONS	
A. If amending name, enter the new name of the	ne limited liability company here:	2: (
The new name must be distinguishable and end with the L.L.C." B. If amending the registered agent and/or registered agent and/or the new registered office.	registered office address on our	" the designation "LLC" or the abbreviation	
Name of New Registered Agent:			
New Registered Office Address:	(Enter	Florida street address)	
	, Florida		
	(City)	(Zip Code)	

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

(If Changing Registered Agent, Signature of New Registered Agent)

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

<u>Title</u>	Name	Address	Type of Action
			Add Remove
			Add Remove
			Add Remove
			Add Remove
			Addi Remove
			Add Remove
D. If amend	ing any other information, enter chang	e(s) here: (Attach additional sheets, if necessary.)	
			SECRETARY OF DIVISION OF CORPO
Dated	All Ino	2. L. M. O.	M 2: 02
(`/ '	of authorized representative of a member or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00